

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 4  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>SEAL PAC SUPPORTING ELECTING AMERICAN LEADERS PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00570226
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee <b>MWPolitical, Inc.</b>		Date of Public Distribution/Dissemination 10 / 22 / 2020	
Mailing Address 114 Karland Dr NW		Amount 10000.00	
City Atlanta	State GA	Zip Code 30305-1126	Transaction ID : E658A9B59B5734A0FB74
Purpose of Expenditure Digital Advertising	Category/Type	Date of Disbursement or Obligation 10 / 21 / 2020	
Name of Federal Candidate McCormick, Richard Dean, Dr., ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>MWPolitical, Inc.</b>		Date of Public Distribution/Dissemination 10 / 22 / 2020	
Mailing Address 114 Karland Dr NW		Amount 10000.00	
City Atlanta	State GA	Zip Code 30305-1126	Transaction ID : E88CFAB2A39F942BBA51
Purpose of Expenditure Digital Advertising	Category/Type	Date of Disbursement or Obligation 10 / 21 / 2020	
Name of Federal Candidate Gonzales, Ernest Anthony Tony, li, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 23 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	20000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kilgore, Paul, , ,

[Electronically Filed]

Date

10 / 23 / 2020

Signature

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee <b>MWPolitical, Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2020	
Mailing Address 114 Karland Dr NW		Amount 20000.00	
City Atlanta	State GA	Zip Code 30305-1126	Transaction ID : EAC54BC7C15BD4C1DA8
Purpose of Expenditure Digital Advertising	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 21 / 2020	
Name of Federal Candidate Franklin, Scott, Mr., ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: 15 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: FL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>MWPolitical, Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2020	
Mailing Address 114 Karland Dr NW		Amount 10000.00	
City Atlanta	State GA	Zip Code 30305-1126	Transaction ID : ED7177FA171204EA8B6D
Purpose of Expenditure Digital Advertising	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 21 / 2020	
Name of Federal Candidate Bacon, Don, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: NE
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	30000.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

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Full Name of Payee <b>MWPolitical, Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2020	
Mailing Address 114 Karland Dr NW		Amount 10000.00	
City Atlanta	State GA	Zip Code 30305-1126	Transaction ID : E36D74BB47A57494C8BB
Purpose of Expenditure Digital Advertising	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 23 / 2020	
Name of Federal Candidate Garcia, Michael, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: 25 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>MWPolitical, Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2020	
Mailing Address 114 Karland Dr NW		Amount 50000.00	
City Atlanta	State GA	Zip Code 30305-1126	Transaction ID : E27DA8F090D164CAEA55
Purpose of Expenditure Digital Advertising	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 23 / 2020	
Name of Federal Candidate James, John, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: MI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	60000.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

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Full Name of Payee <b>MWPolitical, Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2020
Mailing Address 114 Karland Dr NW		Amount 5000.00
City Atlanta	State GA	Zip Code 30305-1126
Purpose of Expenditure Digital Advertising	Category/ Type	Transaction ID : E0718C8595A55410F891 Date of Disbursement or Obligation MM / DD / YYYY 10 / 23 / 2020
Name of Federal Candidate Perry, Scott, ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 90000.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>MWPolitical, Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2020
Mailing Address 114 Karland Dr NW		Amount 10000.00
City Atlanta	State GA	Zip Code 30305-1126
Purpose of Expenditure Digital Advertising	Category/ Type	Transaction ID : EFE449E463CCC4E16B0E Date of Disbursement or Obligation MM / DD / YYYY 10 / 23 / 2020
Name of Federal Candidate Bacon, Don, ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NE
Calendar Year-To-Date Per Election for Office Sought 70000.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	15000.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	125000.00

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Signature

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